



Sanitary Sewer Overflow 5-Day Follow Up Report

Division of Surface Water

Report Submitted By

Date:	7/13/2015
Facility name:	Madison WWTP
Ohio NPDES permit no.:	3PK00032*MD
Period covered by report:	7/11/2015
Contact person	
Name:	Michael McGlothlin
Title:	Superintendent
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County:	Lake
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Email:	Michael.mcglathin@lakecountyohio.gov

Signature required at end of form

Overflow Information

Event start date and time – if multiple locations, include information for each	7/11/2015 @ 8:53am												
Event end date and time	7/11/2015 @ 4:23pm												
Location(s) the SSO – include unique ID number of one exists	Force main. 3115 Center Road North Perry, Ohio												
Destination(s) of overflow	<input type="checkbox"/> Basement or building <input checked="" type="checkbox"/> Ground <input checked="" type="checkbox"/> Storm sewer to receiving water <input type="checkbox"/> Directly to receiving water												
Estimated volume (million gallons) - if multiple locations, include volume for each	.025 MGD spilled on the ground, then traveled approximately 30 yards before it entered a storm sewer and ultimately Lake Erie.												
Sewer system component(s) from which release occurred	<input type="checkbox"/> Manhole <input type="checkbox"/> Constructed overflow <input checked="" type="checkbox"/> Pipe crack <input type="checkbox"/> Pump station <input checked="" type="checkbox"/> Other (explain) Force main.												
Cause(s) of overflow	<table><tr><td><input type="checkbox"/> Extreme weather</td><td><input type="checkbox"/> Equipment failure</td><td><input type="checkbox"/> Power failure</td></tr><tr><td><input type="checkbox"/> Debris in line</td><td><input type="checkbox"/> Roots</td><td><input type="checkbox"/> Grease</td></tr><tr><td><input type="checkbox"/> Other blockages</td><td><input checked="" type="checkbox"/> Line deterioration</td><td><input type="checkbox"/> Vandalism</td></tr><tr><td><input type="checkbox"/> Other (explain)</td><td></td><td></td></tr></table>	<input type="checkbox"/> Extreme weather	<input type="checkbox"/> Equipment failure	<input type="checkbox"/> Power failure	<input type="checkbox"/> Debris in line	<input type="checkbox"/> Roots	<input type="checkbox"/> Grease	<input type="checkbox"/> Other blockages	<input checked="" type="checkbox"/> Line deterioration	<input type="checkbox"/> Vandalism	<input type="checkbox"/> Other (explain)		
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